

EXHIBIT 6

1 IN THE UNITED STATES DISTRICT COURT
2 FOR THE EASTERN DISTRICT OF PENNSYLVANIA
3

4 MONIQUE RUSSELL, JASMINE)
5 RIGGINS, ELSA M. POWELL,)
6 and DESIRE EVANS,)

7 Plaintiffs,)

8) Civil Action No. 18-5629

9) vs.)

10) Honorable Joshua D.

11 EDUCATIONAL COMMISSIONER) Wolson

12 FOR FOREIGN MEDICAL)

13 GRADUATES,)

14) Defendant.)

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VIDEOTAPED DEPOSITION OF JOHN CHARLES HYDE, Ph.D.

(Taken by Defendant)

November 18, 2019

9:40 a.m.

Renaissance Concourse Atlanta Hotel
One Hartsfield Centre Parkway
Atlanta, Georgia

Reported by: F. Renee Finkley, RPR, RMR, CRR, CLR,
CCR-B-2289

1 definition of credentialing. What I'm -- what I'm
2 asking for is what you would actually look at in
3 deciding whether or not to credential a physician.

4 A. Okay. Licensure, training, which could
5 include, obviously, not just internship, but
6 residency and/or fellowship. You would look at their
7 experience. Some of them may not have any. You
8 know, they may be fresh out of the residency program,
9 others may not. You would look at litigation
10 history. You would look at board certification. You
11 would look at health status. And you would look at
12 sort of their general ability to get along with
13 others. Do they play well with others?

14 So you -- you're looking at a lot of
15 different factors that's going to get you that.
16 Also, you would look and see the National
17 Practitioner Data Bank. Have they had any payouts or
18 any convictions of any type of morally-related, moral
19 turpitude, which is typically the terminology. You
20 would look at Office of Inspector General to see if
21 they have had any claims or had the ability to be
22 involved in Medicare/Medicaid.

23 You would look potentially at insurance
24 companies to see if they've been providing on-panels
25 within the insurance world for managed care, so to

John Charles Hyde, Ph.D.

1 speak. I gave you more than a quarter's worth, but
2 that's sort of going down the list.

3 Q. Anything else that you haven't mentioned
4 that you recall that you would look at in deciding
5 whether or not to credential a physician?

6 A. Recommendations, obviously, from -- you
7 know, that goes without saying. Previous history.
8 We would query the other hospitals if the individual
9 was on their -- it depends on their point in their
10 career. If somebody's just out of residency, they're
11 not going to have a lot of previous experience or
12 experiential training outside of residency; but if
13 they were on staff at another hospital, you would ask
14 the hospital, Are they on staff, What level, Are they
15 in good standing.

16 You'd like to get more, but that's sort of
17 all you're going to get. You would probably also
18 query their health grades. You know, there's a lot
19 of different things that would give some idea of some
20 feedback.

21 Q. Anything in addition to that that you
22 would look at when deciding about privileging? If
23 you've just gone through all that for credentialing
24 an individual, how do you go about -- what do you
25 look at for privileging purposes?